09/846067

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

SUNMPOOT

| CLAIMS AS FILED (Colum  |  |   | S FILED -<br>(Column |                      |                              |                  |            | SMALL ENTITY TYPE   |                        |                     | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|----------------------|----------------------|------------------------------|------------------|------------|---------------------|------------------------|---------------------|----------------------------|------------------------|
| TOTAL CLAIMS  |  | 20  |                      |                      |                              | [                | RATE       | FEE                 |                        | RATE                | FEE                        |                        |
| FOR   |  | NUMBER FILED                              |                      | NUMBER EXTRA         |                              |                  | BASIC FEE  | 355.00              | OR                     | BASIC FEE           | 710.00                     |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | 20 minus 20=         |                      | ·\$                          |                  |            | X\$ 9=              |                        | OR                  | X\$18=                     |                        |
| IND   | EPENDENT CL                                    | AIMS                                      | 3 mir                | ius 3 = Ø            |                              |                  |            | X40=                |                        | OR                  | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                      |                      |                              |                  |            | +135=               |                        | OR                  | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter "C   |  |   |                      |                      |                              | olumn 2          | ŧ          | TOTAL               |                        | OR                  | TOTAL                      | 710                    |
| CLAIMS AS AMENDED - PART II  (Column 1)   |  |   |                      |                      |                              |                  |            | SMALL ENTITY        |                        |                     | OTHER THAN SMALL ENTITY    |                        |
| AMENDMENT A   |  | CLAIMS REMAINING AFTER AMENDMENT          |                      | HIGH<br>NUM<br>PREVI |                              | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 17                                      | Minus                | 5                    | 20                           | = /              |            | X\$ 9=              |                        | OR                  | X\$18=                     |                        |
|   | Independent                                    | NITATION OF M                             | Minus                | ENDEN                | 3<br>TCLAIM                  |                  |            | X40=                |                        | OR                  | X80=                       | -                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                      |                      |                              |                  | <b>.</b> [ | +135=               |                        | OR                  | +270=                      |                        |
| ·   |  |   |                      |                      |                              |                  | L          | TOTAL<br>ADDIT, FEE |                        | OR                  | TOTAL<br>ADDIT, FEE        |                        |
|   |  | (Column 1)                                |                      |                      | mn 2)                        | (Column 3)       |            |                     |                        |                     |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  |   | Minus                | **                   |                              | =                |            | X\$ 9=              | •                      | OR                  | X\$18=                     |                        |
| AME   | Independent                                    |   | Minus                | ***                  |                              | <u> -</u>        | ▋▐         | X40=                |                        | OR                  | X80=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                      |                      |                              |                  |            | +135=               |                        | OR                  | +270=                      |                        |
| BEST AVAILABLE COP  |  |   |                      |                      |                              | ۱ اور            |            | TOTAL<br>ADDIT. FEE |                        | OR                  | TOTAL<br>ADDIT. FEE        | ·                      |
|   |  | (Column 1)                                |                      |                      | mn 2)                        | (Column 3)       | _          |                     |                        |                     |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                | **                   |                              | =                |            | X\$ 9=              |                        | OR                  | X\$18=                     |                        |
|   | Independent                                    | •   | Minus                | ***                  | T 01                         | -                | <b> </b>   | X40=                |                        | OR                  | X80=                       |                        |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                      |                      |                              |                  | <b>┙</b> ┞ | +135=               |                        | OR                  | +270=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE |  |   |                      |                      |                              |                  |            |                     |                        | TOTAL<br>ADDIT, FEE |                            |                        |
|   |  | imber Previously P<br>aber Previously Pa  |                      |                      |                              |                  |            |                     | propriate box          |                     |                            |                        |